STATE OF SOUTH DAKOTA Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER Sisseton Courier September				
3. FREQUENCY OF ISSUE	HED ANNUALLY	September 27, 2024 JALLY 3B. ANNUAL SUBSCRIPTION		
weekly	52		PRICE \$65.00 & 70.00	
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) 117 East Oak St., PO Box 169, Sisseton, SD 57262				
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE				
PUBLISHER (Not printers) 117 East Oak St., PO Box 169 Sisseton, SD 57262				
6. FULL NAME OF PUBLISHER: Sylvia A. Deutsch				
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS				
Deutsch Printing Inc. 117 East Oak St., PO Box 169				
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING I PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form. Dacotah Bank PO Box 209, Sisseton, SD 57262 First District Development Co.PO Box1207, Watertown SD 57201 AVERAGE NO. COPIES				
9. EXTENT AND NATURE OF CIRCULATION		AVERAGE NO. CO EACH ISSUED PRECEDIN MONTHS	AC NG 12	TUAL NO. COPIES ISSUED EST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)		1567		1570
B.PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, and counter sales.		624		620
Mail Subscription (Paid and or requested)		784		759
3. Paid Electronic Copies		17		20
C.TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)		1425		1399
D.FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS		24		21
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		8		.8
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)		1457		1428
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing		56		90
2. Return from News Agents		54		52
G.TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)		1567		1570
Statement must be signed by	Publisher, Business Manag	er, or Owner in the	presence of a N	otary Public

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public I swear that the statements made by me are true, correct, and complete:

(Signature)

(Signature)

(Title)

Sworn to before me this day of South Dakota

(Signature)

Sworn to before me this day of South Dakota

Notary Public

My commission expires:

REC 051 9/2016